

ABSTRACT OF THE DISCLOSURE

A breathing normalizer for partial insertion within the user's mouth for normalizing breathing patterns, prevention of snoring, teeth grinding, and light forms of sleep apnea is disclosed. The device includes an outer plate which is positioned external to the user's mouth when in use, an elongated hollow shaft for connecting the structure to a lip plate adapted to be received between the user's lips and teeth, and a generally C-shaped multi-lobed structure adapted for receiving the user's tongue. The device is positioned within the oral cavity of the user in an operative configuration such that the tongue is retained within the multi-lobed structure, the teeth clamp down upon the connector with the lip plate positioned between the teeth and the inner portions of the upper and lower lips. The outer plate further defines a centrally disposed chamber having an inlet tube in fluid communication with the hollow tubular connector for providing an inlet for breathing air. The inlet tube is adapted for connection to a source of gas, such as oxygen, to assist in delivering the gas to the user through the lungs. In addition, the chamber includes a threaded peripheral edge adapted for threaded engagement with a container of medicine thereby facilitating the delivery of oral medications into the user's oral cavity and preferably the delivery of oral medications below the tongue. A medicine receiving chamber is further provided to allow for medicine received therein to be dispensed and/or evaporated in the user's mouth. As a result of proper application of the apparatus breathing at night is normalized, while snoring, grinding of the teeth, and apnea are prevented, and further while medications may be simultaneously delivered orally.